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Form **990-PF**

Return of Private Foundation

or Section 4947(a)(1) Trust Treated as Private Foundation

Do not enter Social Security numbers on this form as it may be made public.

Department of the Treatment of the Treatment Revenue Servi Information about Form 990-PF and its separate instructions is at www.irs.gov/form990pf. For calendar year 2013 or tax year beginning . and ending A Employer identification number Name of foundation 46-7132329 THE WEISBERG FAMILY FOUNDATION Number and street (or P O box number if mail is not delivered to street address) B Telephone number 401-781-6100 48 BARBERRY HILL City or town, state or province, country, and ZIP or foreign postal code C If exemption application is pending, check here PROVIDENCE, RI 02906 G Check all that apply: X Initial return Initial return of a former public charity D 1. Foreign organizations, check here Final return Amended return 2. Foreign organizations meeting the 85% check here and attach computation Address change Name change X Section 501(c)(3) exempt private foundation Check type of organization: E If private foundation status was terminated Section 4947(a)(1) nonexempt charitable trust Other taxable private foundation under section 507(b)(1)(A), check here I Fair market value of all assets at end of year | J Accounting method: Accrual If the foundation is in a 60-month termination Other (specify) (from Part II, col (c), line 16) under section 507(b)(1)(B), check here 433,176. (Part I, column (d) must be on cash basis.) ▶\$ Part | Analysis of Revenue and Expenses (d) Disbursements (c) Adjusted net (a) Revenue and (b) Net investment (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a)) for charitable purposes (cash basis only) expenses per books income ıncome 500,001 1 Contributions, gifts, grants, etc., received Check if the foundation is not required to attach Sch. B Interest on savings and temporary cash investments Dividends and interest from securities 5a Gross rents b Net rental income or (loss) 6a Net gain or (loss) from sale of assets not on line 10 Gross sales price for all assets on line 6a 0 Capital gain net income (from Part IV, line 2) 8 Net short-term capital gain Income modifications 10a Gross sales less returns and allowances b Less Cost of goods sold c Gross profit or (loss) 11 Other income 0 0 500,001 Total, Add lines 1 through 11 0 Compensation of officers, directors, trustees, etc 14 Other employee salaries and wages 15 Pension plans, employee benefits 16a Legal fees **b** Accounting fees c Other professional fees and Administrative 17 Interest 18 Taxes 19 Depreciation and depletion 20 Occupancy 21 Travel, conferences, and meetings 22 Printing and publications Operating Other expenses 24 Total operating and administrative 0 0 expenses. Add lines 13 through 23 66,825 66,825. 25 Contributions, gifts, grants paid Total expenses and disbursements 0 66,825 66,825. Add lines 24 and 25 27 Subtract line 26 from line 12: 433,176 2 Excess of revenue over expenses and disbursements 0 . b Net investment income (if negative, enter -0-)

LHA For Paperwork Reduction Act Notice, see instructions.

c Adjusted net income (if negative, enter -0-)

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For	m 99	0-PF (2013) THE WEISBERG FAMILY	FOU.	NDATION		7132329 Page 2
		*** ** ** ** ** ** ** ** ** ** ** ** **		Beginning of year	End of	
	art	column should be for end-of-year amounts only		(a) Book Value	(b) Book Value	(c) Fair Market Value
		Cash - non-interest-bearing				
	2	Savings and temporary cash investments			433,176.	433,176.
	3	Accounts receivable				
		Less: allowance for doubtful accounts				
	4	Pledges receivable ►				
		Less: allowance for doubtful accounts				
	1 -	Grants receivable	ļ			
	6	Receivables due from officers, directors, trustees, and other		Ì		
		disqualified persons				
	7	Other notes and loans receivable		ļ.		
		Less: allowance for doubtful accounts ▶				
ţ	8	Inventories for sale or use				
Assets		Prepaid expenses and deferred charges	}			
⋖	10a	Investments - U.S. and state government obligations				
	b	Investments - corporate stock				
	C	Investments - corporate bonds				
	11	Investments - land, buildings, and equipment basis				
		Less accumulated depreciation				
	12	Investments - mortgage loans				
	13	Investments - other				
	14	Land, buildings, and equipment: basis ▶				
	1	Less accumulated depreciation				
	15	Other assets (describe ►)			
	16	Total assets (to be completed by all filers - see the		_		
		instructions. Also, see page 1, item 1)		0.	433,176.	433,176.
	17	Accounts payable and accrued expenses				
	18	Grants payable				
es	19	Deferred revenue		<u> </u>		
Liabilities	20	Loans from officers, directors, trustees, and other disqualified persons				
iab	21	Mortgages and other notes payable				
_	22	Other liabilities (describe)			
	23_	Total liabilities (add lines 17 through 22)		0.	0.	
		Foundations that follow SFAS 117, check here				
S	ł	and complete lines 24 through 26 and lines 30 and 31.				
õ	24	Unrestricted				
퍨		Temporarily restricted				
ä	26	Permanently restricted]		·	
Ę		Foundations that do not follow SFAS 117, check here	ן גא			
F		and complete lines 27 through 31.	ľ			
ţ	1	Capital stock, trust principal, or current funds	-	0.	0.	
Net Assets or Fund Balances		Paid-in or capital surplus, or land, bldg., and equipment fund	. }	0.	0.	
¥.	1	Retained earnings, accumulated income, endowment, or other fun	ds	0.	433,176.	
ž	30	Total net assets or fund balances			433,176.	
				0	122 176	
_	31_	Total liabilities and net assets/fund balances		0.	433,176.	
Р	art	Analysis of Changes in Net Assets or Fu	nd B	alances		
1	Total	net assets or fund balances at beginning of year - Part II, column (a), line	30		
	(mus	agree with end-of-year figure reported on prior year's return)			1	0.
2	Enter	amount from Part I, line 27a			2	433,176.
3	Other	increases not included in line 2 (itemize)		·	3	0.
4	Add I	nes 1, 2, and 3			4	433,176.
		ases not included in line 2 (itemize)			5	0.
6	Total	net assets or fund balances at end of year (line 4 minus line 5) - Pa	art II, co	lumn (b), line 30	6	433,176.
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If line 8 is equal to or greater than line 7, check the box in Part VI, line 1b, and complete that part using a 1% tax rate.

See the Part VI instructions.

Enter qualifying distributions from Part XII, line 4

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	m 990-PF (2013) THE WEISBERG FAMILY FOUNDATION			<u>71323</u>		<u> </u>	age 4
	art VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b		948 -	see in	stru	ction	ns)
1a	a Exempt operating foundations described in section 4940(d)(2), check here 🕨 🗔 and enter "N/A" on line	-1.					
	Date of ruling or determination letter: (attach copy of letter if necessary-see instr	ructions)					_
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check here 🕒 🔲 and ente	r 1%	1				0.
	of Part I, line 27b						
	All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of Part I, line 12	2, col. (b). ノ					^
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)		2				<u>0.</u>
3	Add lines 1 and 2		3	_			0.
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)		4				0.
5	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-		5				0.
6							
	a 2013 estimated tax payments and 2012 overpayment credited to 2013		1 1				
	b Exempt foreign organizations - tax withheld at source 6b		1				
	c Tax paid with application for extension of time to file (Form 8868)		1 1				
	d Backup withholding erroneously withheld 6d		١,,				Λ
_	Total credits and payments. Add lines 6a through 6d		7				0.
8		_	8				0.
9	·		9				<u> </u>
10		Defunded N	10				
	Enter the amount of line 10 to be: Credited to 2014 estimated tax ► art VII-A Statements Regarding Activities	Refunded	1 11 1				
	a During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it pa	articipate or intervene	ın	T		Yes	No
18	any political campaign?	articipate or intervent		F	1a		X
	b Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see instruct	ions for the definition	1)?	-	1b		X
U	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of an			t	-10		
	distributed by the foundation in connection with the activities.	, materials pasilon	J u 0,	i			
^	Did the foundation file Form 1120-POL for this year?				1c		Х
	I Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year:						
٠	(1) On the foundation. \blacktriangleright \$ (2) On foundation managers. \blacktriangleright \$	0.		-			
	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed		-	1			
·	managers. > \$ 0.			1			
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?			1	2		Х
_	If "Yes," attach a detailed description of the activities.						
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, article	les of incorporation.	or	- 1			
•	bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes	. ,		İ	3		X
4a	a Did the foundation have unrelated business gross income of \$1,000 or more during the year?				4a		X
	of If "Yes," has it filed a tax return on Form 990-T for this year?		N,	/A [4b		
	Was there a liquidation, termination, dissolution, or substantial contraction during the year?				5		X
	If "Yes," attach the statement required by General Instruction T						
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either:						
	By language in the governing instrument, or						
	By state legislation that effectively amends the governing instrument so that no mandatory directions that	conflict with the state	e law				
	remain in the governing instrument?				6		<u> </u>
7	Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, of	col. (c), and Part X\	/	L	7	X	
8a	Enter the states to which the foundation reports or with which it is registered (see instructions) 🕨						
	RI						
b	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General ((or designate)					
	of each state as required by General Instruction G? If "No," attach explanation				8b	X	
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3)	or 4942(j)(5) for cale	endar	- 1			
	year 2013 or the taxable year beginning in 2013 (see instructions for Part XIV)? If "Yes," complete Part X	_			9	ļ	<u>X</u>
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their name	es and addresses	TMT	1	10	X	

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Part VII-B Statements Regarding Activities for Which		Peguired (contro	46-71323	29	Page 6		
	rullii 4720 May be i	nequired (contin	uea)	1			
5a During the year did the foundation pay or incur any amount to:			[]	}	1		
(1) Carry on propaganda, or otherwise attempt to influence legislation (section			es X No				
(2) Influence the outcome of any specific public election (see section 4955); or to carry on, directly or indirectly,							
any voter registration drive?							
(3) Provide a grant to an individual for travel, study, or other similar purposes?							
(4) Provide a grant to an organization other than a charitable, etc., organization described in section							
509(a)(1), (2), or (3), or section 4940(d)(2)?							
(5) Provide for any purpose other than religious, charitable, scientific, literary, or educational purposes, or for							
the prevention of cruelty to children or animals?		Ye	es 🗶 No				
b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify un	der the exceptions described	ın Regulations	ļ				
section 53.4945 or in a current notice regarding disaster assistance (see instri	uctions)?		N/A	5b			
Organizations relying on a current notice regarding disaster assistance check l	nere			- 1			
c If the answer is "Yes" to question 5a(4), does the foundation claim exemption f	rom the tax because it mainta	ined					
expenditure responsibility for the grant?	N	√I/A Ye	es Do	İ			
If "Yes," attach the statement required by Regulations section 53 494	5-5(d).						
6a Did the foundation, during the year, receive any funds, directly or indirectly, to	pay premiums on						
a personal benefit contract?		Ye	es X No	1			
b Did the foundation, during the year, pay premiums, directly or indirectly, on a	personal benefit contract?			6b	x		
If "Yes" to 6b, file Form 8870							
7a At any time during the tax year, was the foundation a party to a prohibited tax	shelter transaction?		s X No	}	1		
b If "Yes," did the foundation receive any proceeds or have any net income attrib				7b			
Part VIII Information About Officers, Directors, Trust		nagers, Highly					
Paid Employees, and Contractors	,	o , o .	•				
1 List all officers, directors, trustees, foundation managers and their	compensation.						
	(b) Title, and average hours per week devoted	(c) Compensation	(d) Contributions to employee benefit plans and deferred	(e) E	rpense nt, other		
(a) Name and address	hours per week devoted to position	(If not paid, enter -0-)	and deferred compensation	accour	nt, other rances		
NAIDA D. WEISBERG	TRUSTEE	Circi o /	compensation	unov	411005		
48 BARBERRY HILL	11100122						
PROVIDENCE, RI 02906	0.00	0.	0.		0		
DAVID D. WEISBERG	TRUSTEE	 	•		<u> </u>		
217 PROMENADE STREET	TRODIEL						
WARWICK, RI 02886	0.00	0.	0.		0.		
ABBY R. RIBBANS	TRUSTEE	ļ	0.		<u> </u>		
20 HILL DRIVE	TROSIEE						
	0.00	0.	0.		0		
EAST GREENWICH , RI 02818	0.00	 	0.		0.		
2 Compensation of five highest-paid employees (other than those inc	luded on line 1) If none	enter "NONE "					
2 Compensation of five highest-paid employees (other than those inc	(b) Title, and average	Citter HOME.	(d) Contributions to	(e) F	(Dense		
(a) Name and address of each employee paid more than \$50,000	hours per week	(c) Compensation	(d) Contributions to employee benefit plans and deferred	accour	opense nt, other		
NAME OF THE PROPERTY OF THE PR	devoted to position	 	compensation	allow	ances		
NONE							
	<u> </u>	 -					
		-					
							
		 -					
		<u> </u>					
							
Total number of other employees paid over \$50,000					0		
			Earm (QQA_PF	(2012)		

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Part VIII Information About Officers, Directors, Trustees, Foundard Paid Employees, and Contractors (continued)	dation Managers, Highly	
3 Five highest-paid independent contractors for professional services. If none, en		
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE		
Total number of others receiving over \$50,000 for professional services		▶ 0
Part IX-A Summary of Direct Charitable Activities		
List the foundation's four largest direct charitable activities during the tax year. Include relevant sta	atistical information such as the	Fynance
number of organizations and other beneficiaries served, conferences convened, research papers p	produced, etc.	Expenses
1N/A		
_ 		
2		
3		
Y		
4		
Part IX-B Summary of Program-Related Investments	on book divided	8
Describe the two largest program-related investments made by the foundation during the tax year	on lines 1 and 2.	Amount
1 N/A		
2		
All other program-related investments. See instructions.		
3		

Total. Add lines 1 through 3

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P	Part X Minimum Investment Return (All domestic foundations must complete this part. Foreign foun	dations, se	e instructions.)
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes:	<u> </u>	
а	Average monthly fair market value of securities	1a	0.
	Average of monthly cash balances	1b	20,833.
	Fair market value of all other assets	1c	
	Total (add lines 1a, b, and c)	1d	20,833.
	Reduction claimed for blockage or other factors reported on lines 1a and		
	1c (attach detailed explanation)		
2	Acquisition indebtedness applicable to line 1 assets	2	0.
3	Subtract line 2 from line 1d	3	20,833.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	312.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	20,521.
6	Minimum investment return Enter 5% of line 5	6	1,026.
	foreign organizations check here and do not complete this part.)		1 006
1	Minimum investment return from Part X, line 6	1	1,026.
	Tax on investment income for 2013 from Part VI, line 5		
	,		•
		2c	0.
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	1,026.
4	Recoveries of amounts treated as qualifying distributions	4	0.
5	Add lines 3 and 4	5	1,026.
6	Deduction from distributable amount (see instructions)	6	0.
<u>7</u>	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1	7	1,026.
ட	Qualifying Distributions (see instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:		
8	Expenses, contributions, gifts, etc total from Part I, column (d), line 26	1a 📗	66,825.
b	Program-related investments - total from Part IX-B	1b	0.
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes	2	
3	Amounts set aside for specific charitable projects that satisfy the:		
a	Suitability test (prior IRS approval required)	3a	
b	Cash distribution test (attach the required schedule)	3b	
4	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4	4	66,825.
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment		

Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation qualifies for the section 4940(e) reduction of tax in those years.

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income. Enter 1% of Part I, line 27b

Adjusted qualifying distributions Subtract line 5 from line 4

Part XIII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2012	(c) 2012	(d) 2013
1 Distributable amount for 2013 from Part XI, line 7				1,026.
2 Undistributed income, if any, as of the end of 2013				
a Enter amount for 2012 only			0.	
b Total for prior years:				
		0.		
3 Excess distributions carryover, if any, to 2013:				
a From 2008				
b From 2009				
c From 2010			!	
d From 2011				
e From 2012				
f Total of lines 3a through e	0.			
4 Qualifying distributions for 2013 from				
Part XII, line 4: ▶\$ 66,825.				
a Applied to 2012, but not more than line 2a			0.	
b Applied to undistributed income of prior				
years (Election required - see instructions)		0.		
c Treated as distributions out of corpus				
(Election required - see instructions)	0.			
d Applied to 2013 distributable amount				1,026.
e Remaining amount distributed out of corpus	65,799.			
5 Excess distributions carryover applied to 2013 (If an amount appears in column (d), the same amount	0.			0.
must be shown in column (a)) 6 Enter the net total of each column as				
indicated below:	65,799.			
a Corpus Add lines 3f, 4c, and 4e Subtract line 5	05,133.			
b Prior years' undistributed income. Subtract		0.		•
line 4b from line 2b				
c Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed		0.		
d Subtract line 6c from line 6b. Taxable				
amount - see instructions		0.		
e Undistributed income for 2012. Subtract line				
4a from line 2a. Taxable amount - see instr.			0.	
f Undistributed income for 2013. Subtract				
lines 4d and 5 from line 1. This amount must				
be distributed in 2014				0.
7 Amounts treated as distributions out of				
corpus to satisfy requirements imposed by				
section 170(b)(1)(F) or 4942(g)(3)	0.			
8 Excess distributions carryover from 2008	_			
not applied on line 5 or line 7	0.			
9 Excess distributions carryover to 2014.				
Subtract lines 7 and 8 from line 6a	65,799.			
O Analysis of line 9:				
a Excess from 2009				
b Excess from 2010				
c Excess from 2011				
d Excess from 2012				
e Excess from 2013 65,799.	<u></u>			Form 990-PF (2013)

Part XIV Private Operating Foundations (see instructions and Part VII-A, question 9) 1 a If the foundation has received a ruling or determination letter that it is a private operating foundation, and the ruling is effective for 2013, enter the date of the ruling b Check box to indicate whether the foundation is a private operating foundation described in section 1 4942(j)(3) or 4942(j)(5)	
foundation, and the ruling is effective for 2013, enter the date of the ruling	
· — — — — — — — — — — — — — — — — — — —	
b Check box to indicate whether the foundation is a private operation foundation described in section 1 4942(i)(3) or 1 4942(i)(5)	
2 a Enter the lesser of the adjusted net Tax year Prior 3 years	_
Income from Part I or the minimum (a) 2013 (b) 2012 (c) 2011 (d) 2010 (e) Total	<u></u>
investment return from Part X for	
each year listed	
b 85% of line 2a	
c Qualifying distributions from Part XII,	
line 4 for each year listed	
d Amounts included in line 2c not	
used directly for active conduct of	
exempt activities	
e Qualifying distributions made directly	
for active conduct of exempt activities.	
Subtract line 2d from line 2c	
3 Complete 3a, b, or c for the	_
alternative test relied upon: a "Assets" alternative test - enter:	
(1) Value of all assets	
(2) Value of assets qualifying under section 4942(j)(3)(B)(i)	
b "Endowment" alternative test - enter	
2/3 of minimum investment return	
shown in Part X, line 6 for each year	
c "Support" alternative test - enter:	
(1) Total support other than gross	
investment income (interest,	
dividends, rents, payments on	
securities loans (section	
512(a)(5)), or royalties)	
(2) Support from general public and 5 or more exempt	
organizations as provided in	
section 4942(j)(3)(B)(iii)	
(3) Largest amount of support from	
an exempt organization	
(4) Gross investment income	
Part XV Supplementary Information (Complete this part only if the foundation had \$5,000 or more in asse	เร
at any time during the year-see instructions.)	
1 Information Regarding Foundation Managers:	
a List any managers of the foundation who have contributed more than 2% of the total contributions received by the foundation before the close of any tax year (but only if they have contributed more than \$5,000). (See section 507(d)(2).)	
NONE	
b List any managers of the foundation who own 10% or more of the stock of a corporation (or an equally large portion of the ownership of a partnership or other entity) of which the foundation has a 10% or greater interest.	
•	
NONE	
2 Information Regarding Contribution, Grant, Gift, Loan, Scholarship, etc., Programs: Check here ► X if the foundation only makes contributions to preselected charitable organizations and does not accept unsolicited requests for funds. I	
the foundation makes gifts, grants, etc. (see instructions) to individuals or organizations under other conditions, complete items 2a, b, c, and d.	1
a The name, address, and telephone number or e-mail address of the person to whom applications should be addressed:	
b The form in which applications should be submitted and information and materials they should include:	
c Any submission deadlines:	· <u>-</u> -
d Any restrictions or limitations on awards, such as by geographical areas, charitable fields, kinds of institutions, or other factors:	
u Any restrictions of infiliations of awards, such as by yeographical areas, charitable helds, kinds of institutions, of other factors.	
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Part XV Supplementary Information (continued)

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** SEE PURPOSE OF GRANT CONTINUATIONS

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Part XVI-A	Analysis of Income-Produ	icing Activities
Fait AVITA	Alialysis of filodille-Flour	Julia Venaine

Enter gross amounts unless otherwise indicated.	Unrelate	ed business income		ided by section 512, 513, or 514	(e)
	(a) Business	(b) Amount	(C) Exclu- sion	(d) Amount	Related or exempt function income
1 Program service revenue:	code	Amount	code	Amount	Turiction income
a					
b					
c					
d					
e					
g Fees and contracts from government agencies					
2 Membership dues and assessments	·				
3 Interest on savings and temporary cash					
investments					
4 Dividends and interest from securities					-
5 Net rental income or (loss) from real estate:	—				
			<u> </u>		
a Debt-financed property					
b Not debt-financed property	<u> </u>				
6 Net rental income or (loss) from personal					
property					
7 Other investment income			-		
8 Gain or (loss) from sales of assets other			ĺ		
than inventory	<u> </u>			· · ·	
9 Net income or (loss) from special events			 		
10 Gross profit or (loss) from sales of inventory			-		
11 Other revenue:					
a					
b					
C					
	li .				
d					
d					
d e 12 Subtotal. Add columns (b), (d), and (e)		0.		0.	
d e 12 Subtotal. Add columns (b), (d), and (e) 13 Total. Add line 12, columns (b), (d), and (e)		0.			0.
d e 12 Subtotal. Add columns (b), (d), and (e)		0.			
d e 12 Subtotal. Add columns (b), (d), and (e) 13 Total. Add line 12, columns (b), (d), and (e)	o the Acc		emp	13	
d e 12 Subtotal. Add columns (b), (d), and (e) 13 Total. Add line 12, columns (b), (d), and (e) (See worksheet in line 13 instructions to verify calculations.) Part XVI-B Relationship of Activities to		omplishment of Ex		ot Purposes	0.
d e 12 Subtotal. Add columns (b), (d), and (e) 13 Total. Add line 12, columns (b), (d), and (e) (See worksheet in line 13 instructions to verify calculations.) Part XVI-B Relationship of Activities to Line No. Explain below how each activity for which income	ne is reported	omplishment of Ex		ot Purposes	0.
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d e 12 Subtotal. Add columns (b), (d), and (e) 13 Total. Add line 12, columns (b), (d), and (e) (See worksheet in line 13 instructions to verify calculations.) Part XVI-B Relationship of Activities to Line No. Explain below how each activity for which income	ne is reported	omplishment of Ex		ot Purposes	0.
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d e 12 Subtotal. Add columns (b), (d), and (e) 13 Total. Add line 12, columns (b), (d), and (e) (See worksheet in line 13 instructions to verify calculations.) Part XVI-B Relationship of Activities to Line No. Explain below how each activity for which income	ne is reported	omplishment of Ex		ot Purposes	0.
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d e 12 Subtotal. Add columns (b), (d), and (e) 13 Total. Add line 12, columns (b), (d), and (e) (See worksheet in line 13 instructions to verify calculations.) Part XVI-B Relationship of Activities to Line No. Explain below how each activity for which income	ne is reported	omplishment of Ex		ot Purposes	0.
d e 12 Subtotal. Add columns (b), (d), and (e) 13 Total. Add line 12, columns (b), (d), and (e) (See worksheet in line 13 instructions to verify calculations.) Part XVI-B Relationship of Activities to Line No. Explain below how each activity for which income	ne is reported	omplishment of Ex		ot Purposes	0.
d e 12 Subtotal. Add columns (b), (d), and (e) 13 Total. Add line 12, columns (b), (d), and (e) (See worksheet in line 13 instructions to verify calculations.) Part XVI-B Relationship of Activities to Line No. Explain below how each activity for which income	ne is reported	omplishment of Ex		ot Purposes	0.
d e 12 Subtotal. Add columns (b), (d), and (e) 13 Total. Add line 12, columns (b), (d), and (e) (See worksheet in line 13 instructions to verify calculations.) Part XVI-B Relationship of Activities to Line No. Explain below how each activity for which income	ne is reported	omplishment of Ex		ot Purposes	0.
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d e 12 Subtotal. Add columns (b), (d), and (e) 13 Total. Add line 12, columns (b), (d), and (e) (See worksheet in line 13 instructions to verify calculations.) Part XVI-B Relationship of Activities to Line No. Explain below how each activity for which income	ne is reported	omplishment of Ex		ot Purposes	0.
d e 12 Subtotal. Add columns (b), (d), and (e) 13 Total. Add line 12, columns (b), (d), and (e) (See worksheet in line 13 instructions to verify calculations.) Part XVI-B Relationship of Activities to Line No. Explain below how each activity for which income	ne is reported	omplishment of Ex		ot Purposes	0.

THE WEISBERG FAMILY FOUNDATION 46-7132329 Page 13 Form 990-PF (2013) Information Regarding Transfers To and Transactions and Relationships With Noncharitable Part XVII **Exempt Organizations** Yes No Did the organization directly or indirectly engage in any of the following with any other organization described in section 501(c) of the Code (other than section 501(c)(3) organizations) or in section 527, relating to political organizations? a Transfers from the reporting foundation to a noncharitable exempt organization of: (1) Cash 1a(1) (2) Other assets 1a(2) **b** Other transactions: 1b(1) (1) Sales of assets to a noncharitable exempt organization 1b(2) (2) Purchases of assets from a noncharitable exempt organization 1b(3) (3) Rental of facilities, equipment, or other assets 1b(4) (4) Reimbursement arrangements 1b(5) (5) Loans or loan guarantees 1b(6) (6) Performance of services or membership or fundraising solicitations c Sharing of facilities, equipment, mailing lists, other assets, or paid employees 1c d If the answer to any of the above is "Yes," complete the following schedule. Column (b) should always show the fair market value of the goods, other assets, or services given by the reporting foundation. If the foundation received less than fair market value in any transaction or sharing arrangement, show in column (d) the value of the goods, other assets, or services received. (c) Name of noncharitable exempt organization (a) Line no (b) Amount involved (d) Description of transfers, transactions, and sharing arrangements N/A 2a Is the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described Yes X No in section 501(c) of the Code (other than section 501(c)(3)) or in section 527? b If "Yes," complete the following schedule. (a) Name of organization (b) Type of organization (c) Description of relationship N/A Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge with the prepare Sian shown below (see instr)? Here Yes Title Date Date Check PTIN Preparer's signature Print/Type preparer's name self- employed

Form **990-PF** (2013)

Paid Preparer

Use Only

Firm's EIN ▶

Phone no.

Firm's name

Firm's address

Schedule B (Form 990, 990-EZ, or 990-PF)

Department of the Treasury Internal Revenue Service

Schedule of Contributors

► Attach to Form 990, Form 990-EZ, or Form 990-PF.

► Information about Schedule B (Form 990, 990-EZ, or 990-PF) and its instructions is at www.irs.gov/form990.

OMB No 1545-0047

2013

Name of the organization

Employer identification number

Organization type (check one):	
Filers of: Section:	
Form 990 or 990-EZ 501(c)() (enter number) organization	
4947(a)(1) nonexempt charitable trust not treated as a private foundation	
527 political organization	
Form 990-PF S01(c)(3) exempt private foundation	
4947(a)(1) nonexempt charitable trust treated as a private foundation	
501(c)(3) taxable private foundation	
Check if your organization is covered by the General Rule or a Special Rule . Note. Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule General Rule X For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, \$5,000 or more (in more)	
contributor Complete Parts I and II.	
Special Rules	
For a section 501(c)(3) organization filing Form 990 or 990-EZ that met the 33 1/3% support test of the regul 509(a)(1) and 170(b)(1)(A)(vi) and received from any one contributor, during the year, a contribution of the gr	
For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributions of more than \$1,000 for use exclusively for religious, charitable, scientific, literary, or education of cruelty to children or animals. Complete Parts I, II, and III.	
For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributions for use exclusively for religious, charitable, etc., purposes, but these contributions did not total if this box is checked, enter here the total contributions that were received during the year for an exclusively purpose. Do not complete any of the parts unless the General Rule applies to this organization because it religious, charitable, etc., contributions of \$5,000 or more during the year	l to more than \$1,000. religious, charitable, etc.,
Caution. An organization that is not covered by the General Rule and/or the Special Rules does not file Schedule B in but it must answer "No" on Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its For certify that it does not meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).	

Name of organization

Employer identification number

THE WEISBERG FAMILY FOUNDATION

46-7132329

Part I	Contributors (see instructions) Use duplicate copies of Part I if ac	dditional space is needed	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	NAIDA D. WESIBERG 48 BARBERRY HILL PROVIDENCE , RI 02906	\$	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
			Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
			Person Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash Complete Part II for noncash contributions.)

Name of organization

Employer identification number

THE WEISBERG FAMILY FOUNDATION

46-7132329

Part II	Noncash Property (see instructions). Use duplicate copies of Part	II if additional space is needed.	
(a) No. from Part I	(b) Description of noncash property given	_ (c) FMV (or estimate) (see instructions)	(d) Date received
		 \$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		 \$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received

lame of orga	nization	Employer Identification number			
PHE WE	ISBERG FAMILY FOUNDATI Exclusively religious, charitable, etc., indiv year. Complete columns (a) through (e) and the total of exclusively religious, charitable, et	vidual contributions to section 501(c)(46-7132329 7), (8), or (10) organizations that total more than \$1,000 for the scompleting Part III, enter		
	Use duplicate copies of Part III if addition	c., contributions of \$1,000 of less for the sales and the sales of the sales are sales as the sales are sales as the sales are sales as the sales are sales	The year. (Enter this information once)		
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held		
-		(e) Transfer of gift			
-	Transferee's name, address, a	nd ZIP + 4	Relationship of transferor to transferee		
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held		
-	(e) Trans Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee		
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held		
-	(e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee				
-					
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held		
-	(e) Transfer of gift				
-	Transferee's name, address, ar	nd ZIP + 4	Relationship of transferor to transferee		
			Cabadula B /Farm 000, 000 F7, az 000 BF) /00		

3 Grants and Contributions Paid During the Y				
Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager	Foundation status of	Purpose of grant or contribution	Amount
<u> </u>	or substantial contributor	recipient		
CHILDREN'S FRIEND	NONE	PC	SUPPORT THE WELL BEING	
153 SUMMER STREET			AND HEALTHY	
PROVIDENCE, RI 02903			DEVELOPMENT OF RHODE	
		İ	ISLAND'S MOST	
CHILDREN'S SCHOOL OF SCIENCE, INC.	1017	PC	VULNERABLE YOUNG SUPPORT THE CHILDREN'S	500
•	NONE	FC	SCHOOL OF SCIENCE IN	
24 SCHOOL STREET, PO BOX 522 WOODS HOLE, MA 02543		ļ	ITS EFFORT TO	
WOODS HOLLE, MA 02343			ENCOURAGE A LOVE OF	
			SCIENCE THROUGH	1,000
			SCIENCE TIMOOON	
COMMON CAUSE RHODE ISLAND	NONE	PC	SUPPORT OF CITIZENS	
245 WATERMAN STREET			MAKING THEIR VOICES	
PROVIDENCE RI 02906-5215			HEARD.	500
COMMUNITY MUSICWORKS	NONE	PC	SUPPORT A COMMUNITY	
1392 WESTMINSTER STREET			BASED ORGANIZATION	
PROVIDENCE, RI 02909			THAT BUILDS	
			RELATIONSHIPS BETWEEN	
			MUSICIANS AND FAMILIES	2,000
CROSSROADS RHODE ISLAND	NONE	PC PC	SUPPORT OF ESSENTIAL	
160 BROAD STREET			LIFE SERVICES TO	
PROVIDENCE, RI 02903			HOMELESS FAMILIES,	
		}	WOMEN AND MEN IN RHODE	
			ISLAND.	500
DANA-FARBER	NONE	PC	SUPPORT TO PROVIDING	
10 BROOKLINE PLACE WEST, 6TH FLOOR			ADULTS AND CHILDREN	
BROOKLINE, MA 02445-7226			WITH CANCER THE BEST	
			TREATMENT AVAILABLE	
			TODAY AND DEVELOPMENT	<u> </u>
DOCTORS WITHOUT BORDERS	NONE	₽C	SUPPORT OF EMERGENCY	
333 SEVENTH AVENUE , 2ND FLOOR			MEDICAL AID TO PEOPLE	
NEW YORK NY 10001			WORLDWIDE IN NEED.	300
HOME AND HOSPICE CARE OF RHODE ISLAND	NONE	PC	SUPPORT OF	-
1085 NORTH MAIN STREET			COMPASSIONATE HEALTH	
PROVIDENCE, RI 02904			CARE TO PEOPLE FACING	
			THE ADVANCED STAGES OF	
			A SERIOUS ILLNESS.	1,000
INSPIRING MINDS	NONE	PC	SUPPORT THE CREATION	
63 WESTMINSTER STREET			OF SUCCESSFUL STUDENTS	
PROVIDENCE, RI 02903			BY PROVIDING THEM WITH	
			ACADEMIC AND SOCIAL	
			SERVICES.	3,000
EWISH ALLIANCE OF GREATER RI	NONE	PC	SUPPORT OF THE	
101 ELMGROVE AVENUE		[]	CELEBRATION OF JEWISH	
PROVIDENCE RI 02906			IDENTITY.	2,000
Total from continuation sheets		•		64,925

3 Grants and Contributions Paid During the	Year (Continuation)			
Recipient	If recipient is an individual,	Foundation	Durnoss of great or	
Name and address (home or business)	show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
JEWISH FAMILY SERVICE	NONE	PC	SUPPORT OF HUMAN	
959 NORTH MAIN STREET			SERVICES AND HEALTH	
PROVIDENCE, RI 02904			CARE REFLECTING JEWISH	
,			VALUES OF SOCIAL	
			RESPONSIBILITY AND	1,000
JEWISH VOICE AND HERALD	NONE	PC	SUPPORT THE ACCESS TO	
401 ELMGROVE AVENUE			A MEANINGFUL JEWISH	
PROVIDENCE, RI 02906			LIFE EXPERIENCE.	100
TOWN CLEANING PROVING LANDING			GUDDORW WUT GENWARD BOD	
JOHN CARTER BROWN LIBRARY	NONE	PC	SUPPORT THE CENTER FOR	
BOX 1894			ADVANCED RESEARCH IN	
PROVIDENCE, RI 02912			HISTORY AND THE	
			HUMANITIES,	500
LAURELMEAD EMPLOYEE EDUCATION FUND	NONE	₽C	SUPPORT OF EDUCATIONAL	
355 BLACKSTONE BOULEVARD	NONE		INSTITUTIONS AND	
PROVIDENCE RI 02906			RELATED ACTIVITIES.	100
LEUKEMIA & LYMPHOMA SOCIETY	NONE	PC	SUPPORT OF A HEALTH	
PO BOX 4261	NONE		ORGANIZATION DEDICATED	
PITTSFIELD, RI 01202			TO FUNDING BLOOD	
IIIISTIEMD, RI 01202			CANCER RESEARCH AND	
			PROVIDING EDUCATION	100
MIRIAM HOSPITAL FOUNDATION	NONE	PC	SUPPORT THE HOSPITAL	
DEVELOPMENT OFFICE, BOX H			IN THEIR EFFORTS TO	
PROVIDENCE, RI 02901			PROVIDE THE HIGHEST	
			QUALITY CARE,	5,000
NATIONAL MULTIPLE SCLEROSIS SOCIETY	NONE	PC	SUPPORT FOR THE	
205 HALLENE ROAD, SUITE 209			RESEARCH TO FIND A	
WARWICK RI 02886		<u> </u>	CURE FOR MS.	125
NATIONAL WILDLIFE FEDERATION	NONE	PC	SUPPORT THE COMMON	
PO BOX 1582			COMMITMENT TO	
MERRIFIELD, VA 22116-1582			CONSERVATION FOR	
			WILDLIFE AND WILD	
			PLACES,	150
OXFAM	NONE	PC PC	SUPPORT OF THE	
226 CAUSEWAY STREET, 5TH FLOOR	10212	[]	MOBILIZATION OF THE	
BOSTON, MA 02114-2206		1	POWER OF PEOPLE	
DOSION, MA 02114-2200			1	200
		<u> </u>	AGAINST POVERTY.	200
PLANNED PARENTHOOD OF SOUTHERN NEW	NONE	PC	SUPPORT OF	
ENGLAND	HOME			
			REPRODUCTIVE	
345 WHITNEY AVENUE			HEALTHCARE AND	2.000
NEW HAVEN, CT 06511 Total from continuation sheets	<u> </u>		ADVOCACY.	2,000

3 Grants and Contributions Paid During the				
Recipient	If recipient is an individual, show any relationship to	Foundation	Purpose of grant or	Amount
Name and address (home or business)	any foundation manager or substantial contributor	status of recipient	contribution	Amount
PROVIDENCE ANIMAL RESCUE LEAGUE	NONE	₽C	SUPPORT THE RESCUE AND	
34 ELBOW STREET			RELIEF OF SUFFERING	
PROVIDENCE RI 02903			HOMELESS ANIMALS.	500
PROVIDENCE COMMUNITY LIBRARY	NONE	PC	SUPPORT THE LIBRARY	
PO BOX 9267			SERVICES THAT ENRICH	
PROVIDENCE, RI 02940		1	THE LIVES OF THE	
			PEOPLE IN PROVIDENCE.	3,000
PROVIDENCE SINGERS	NONE	PC	SUPPORT THE PROVIDENCE	
667 WATERMAN AVENUE			SINGERS CHORAL	
PROVIDENCE, RI 02914-1712			SINGING, INNOVATION	F 0.4
			AND PUBLIC ENGAGEMENT.	500
RHODE ISLAND COLLEGE FOUNDATION	NONE	PC	SUPPORT OF RHODE	
600 MT. PLEASANT AVENUE			ISLAND COLLEGE.	
PROVIDENCE RI 02908	10012	PC	GUDDONG WUD DOOD DANKS	1,250
RHODE ISLAND FOOD BANK	NONE	PC	SUPPORT THE FOOD BANKS EFFORTS TO PROVIDE	
200 NIANTIC AVENUE			FOOD TO PEOPLE IN NEED	
PROVIDENCE, RI 02907			AND PROMOTE LONG-TERM	
			SOLUTIONS TO HUNGER.	200
RHODE ISLAND PBS	NONE	PC	SUPPORT PUBLIC	
PO BOX 883	HONE		EDUCATIONAL	
PROVIDENCE, RI 02901-0883			PROGRAMMING	1,000
RHODE ISLAND SCHOOL OF DESIGN MUSEUM	NONE	PC	SUPPORT THE RHODE	
PO BOX 417603			ISLAND SCHOOL OF	
BOSTON, MA 02241-7603			DESIGN.	500
RI JEWISH HISTORICAL ASSOCIATION	NONE	PC	SUPPORT THE OLDEST	
130 SESSIONS STREET			JEWISH HISTORICAL	
PROVIDENCE, RI 02906-3499			SOCIETY.	2,000
RI PHILHARMONIC ORCHESTRA & MUSIC	NONE	₽C	SUPPORT OF THE	
SCHOOL			LIFELONG INVOLVEMENT	
567 WATERMAN AVENUE			WITH MUSIC.	
EAST PROVIDENCE, RI 02914-9904				5,000
RI PUBLIC RADIO	NONE	PC	SUPPORT OF PUBLIC	
ONE UNION STATION		}	RADIO IN RHODE ISLAND.	
PROVIDENCE, RI 02903				1,000
Total from continuation sheets				

3 Grants and Contributions Paid During the	Year (Continuation)			
` Recipient	If recipient is an individual,	Foundation	Purpose of grant or	
Name and address (home or business)	show any relationship to any foundation manager or substantial contributor	status of recipient	contribution	Amount
	oi ouddianta communic			
SLATER MILL	NONE	PC	SUPPORT THE HISTORICAL	
PO BOX 696			SERVICES PROVIDED BY	
PAWTUCKET, RI 02862-0696			SLATER MILL.	300
			OVIDDODE GATERY COLLEGE	
SMITH COLLEGE	NONE	PC	SUPPORT SMITH COLLEGE.	
PO BOX 340029			<u> </u>	1,000
BOSTON, MA 02241-0429		-		1,000
SOUTHERN POVERTY LAW CENTER	NONE	PC	SUPPORT JUSTICE FOR	
400 WASHINGTON AVENUE, PO BOX 5632			THE MOST VULNERABLE	
MONTGOMERY, AL 36177-7459			MEMBERS OF SOCIETY.	100
SOUTHSIDE COMMUNITY LAND TRUST	NONE	PC	SUPPORT COMMUNITY FOOD	
109 SOMERSET STREET			SECURITY, PROVIDING	
PROVIDENCE, RI 02907			LAND, EDUCATION,	
			TOOLS, AND SUPPORT FOR	
			PEOPLE TO GROW FOOD	5,000
SPECIAL OLYMPICS RHODE ISLAND	NONE	PC	SUPPORT OF THE RHODE	
PO BOX 7550			ISLANDS SPECIAL	
WARWICK, RI 02887-7550			OLYMPICS TRAINING AND	500
			ATHLETIC PROGRAMS.	500
THE 300 COMMITTEE	NONE	₽C	SUPPORT THE	
157 LOCUST STREET			PRESERVATION OF THE NATURAL LANDS IN	
FALMOUTH, MA 02540-2658			FALMOUTH,	
			MASSACHUSETTS.	500
THE DRAMA THERAPY FUND	- NONE	PC	SUPPORT OF THE USE OF	
1626 LEAVENWORTH STREET			DRAMA PROCESSES TO	
MANHATTAN, KS 66502			ACHIEVE THERAPEUTIC	
·		-	GOALS,	2,000
TUR CANOL MURAMPE	NONE	BC.	SIIDDODU OF LOCAL	
THE GAMM THEATRE	NONE	PC	SUPPORT OF LOCAL THEATRE.	
172 EXCHANGE STREET PAWTUCKET RI 02860			I I I I I I I I I I I I I I I I I I I	3,000
TANIOCREI, RI UZOUU				3,000
THE NATURE CONSERVANCY	NONE	PC	SUPPORT TO PROTECT THE	
4245 N. FAIRFAX DRIVE, SUITE 100			BEAUTY AND INTEGRITY	
ARLINGTON, VA 22203			OF OUR NATURAL	
			HERITAGE.	200
TOCKWOTTON HOME	NONE	PC	SUPPORT OF SENIOR	
500 WATERFRONT DRIVE			SERVICES.	
	j.	1	1	5,000

Part XV Supplementary Information 3 Grants and Contributions Paid During the Y				
Recipient	If recipient is an individual, show any relationship to	Foundation	Purpose of grant or	Amount
Name and address (home or business)	any foundation manager or substantial contributor	status of recipient	contribution	
TRINITY REPERTORY COMPANY	NONE	PC	SUPPORT OF PROVIDENCE	
201 WASHINGTON STREET			THEATRE.	2.00
PROVIDENCE RI 02903-3297 URBAN COLLABORATIVE ACCELERATED	NONE	PC	SUPPORT THE UNIQUE	3,000
PROGRAM			ALTERNATIVE	
75 CARPENTER STREET			INDEPENDENT PUBLIC	
PROVIDENCE, RI 02903			MIDDLE SCHOOL DEDICATED TO REDUCING	2,000
		-	DEDICATED TO REDUCING	2,000
VOLUMENTED GERMAGEG FOR ANYTHING	NONE	PC	SUPPORT OF MUNICIPAL	
VOLUNTEER SERVICES FOR ANIMALS PO BOX 6263	NONE		ANIMAL SHELTERS.	
PROVIDENCE, RI 02940				200
WGBH	NONE	PC	SUPPORT PUBLIC	
PO BOX 55875			EDUCATIONAL	
BOSTON, MA 02205-5875			PROGRAMMING	1,300
WOMEN'S ASSOCIATION OF JEWISH SENIORS	NONE	PC	SUPPORT OF JEWISH	
AGENCY			ELDERCARE IN RHODE	
100 NIANTIC AVENUE			ISLAND.	50/
PROVIDENCE, RI 02907				500
WOMENS CENTER	NONE	PC	SUPPORT THE SERVICES	
PO BOX 60330			AND HOPE FOR A BETTER	
PROVIDENCE, RI 02906			TOMORROW FOR VICTIMS OF DOMESTIC VIOLENCE.	300
			OF DOMESTIC VIOLENCE.	300
Total from continuation sheets				·

FORM 990-PF LIST OF SUBSTANTIAL CONTRIBUTORS PART VII-A, LINE 10

STATEMENT 1

NAME OF CONTRIBUTOR

ADDRESS

NAIDA D. WEISBERG

48 BARBERRY HILL PROVIDENCE, RI 02906